DOC # 0740558 03/31/2009 01:00 PM Deputy: SI OFFICIAL RECORD

OFFICIAL RECORD
Requested By:

NORTHERN NEVADA TITLE

COMPANY

Douglas County - NV Karen Ellison - Recorder

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FOR RECORDER'S USE ONLY

TITLE OF DOCUMENT: Special Power of Attorney

The undersigned hereby affirms that this document submitted for recording contains a Social Security number.

NORTHERN NEVADA TITLE COMPANY

Signed By:

Print Name/Title: Wendy Dunbar

APN: 1220-28-510-018

ORDER NO.: 2090133-WD/1090353

WHEN RECORDED MAIL TO:

Michelle Gilliland 328A Fegan Dr. San Clemente, CA 92672

## SPECIAL POWER OF ATTORNEY

PREAMBLE: This is a MILITARY POWER OF ATTORNEY prepared pursuant to Title 10, United States Code, Section 1044b, and executed by a person authorized to receive legal assistance from the military services. Federal law exempts this power of attorney from any requirement of form, substance, formality, or recording that is prescribed for powers of attorney by the laws of a state, the District of Columbia, or a territory, commonwealth, or possession of the United States. Federal law specifies that this power of attorney shall be given the same legal effect as a power of attorney prepared and executed in accordance with the laws of the jurisdiction where it is presented.

•			/ . /	
KNOW ALL PERSON	NS BY THESE PRESENTS: That I, _	JOSEPH GI	WILAND	Social Security
Number	, currently residing at 328 A	FEGAN DR. SA	N CLEMONTE, CA	(address),
do hereby appoint Miche	ELLE CILLILAMD	as my agent (atto	orney-in-fact) to act for	me in any lawful
way with respect to the following	g matters that have been signed by me:			/
	TO GRANT ONE OR MORE OF THE SIGN THE LINE IN FRONT OF EACH TO WITHHOLD A POWER DO NOT SIYOU MAY, BUT NEED NOT, CROSS O	POWER YOU ARE GI GN THE LINE IN FRO	RANTING INT OF IT.	
Ca	. TO TAKE POSSESSION OF MY HOUSEH ossession and order the removal and shipment cause it to be shipped to any warehouse, depot, do y orders of appropriate U.S. Government transpertificates and receipts to carry out the foregoing.	of my household goods, pe ick, or other place of storage	rsonal baggage, or other pe or safekeeping, governmen	ersonal property and at or private, directed
	TO ACCEPT DELIVERY OF MY HOUSEHOL  by household goods and/or unaccompanied bagga  cket or other instrument necessary or convenient for	age, and to sign any and al		
1. X. XXXX 10	TO ACCEPT MILITARY QUARTERS ON I embers at any military installation; to sign for me ossession of any furniture, appliances, and equip ssigned; to execute all necessary documents, instr	e and take possession of sument that may be authorize	uch quarters in my name; a ed for use in or with such q	nd sign for and take puarters as I may be
	TO TERMINATE MILITARY QUARTERS O ssigned to me or my family members, to procure and to sign any and all documents and do all acts no	or return any and all U.S. go	overnment property used in	or for such quarters;
202000 a	. TO PREPARE AND FILE MY FEDERAL AN nd State tax returns for the State(s) of	D STATE INCOME TAXES VADA	: To prepare, execute, sign for the tax year 20_@	and file my Federal
209 11100	TO PERFORM BANKING TRANSACTIONS ame and to otherwise withdraw from and/or depos	it into my account number(s		with
The collection to	endorse, cash and receive the proceeds of any ch	eck or other negotiable instr	(name of bank or rument, which is, made paya	financial institution); ble to me.
all in:	, TO HANDLE ANY LAWSUIT OR OTHER to resecute, or to appear and defend, any claims or a sum of money and all other things which are no stitute accounts on my behalf, and to deposit, drowers granted herein.	litigation involving me or my w or will become owing or b	interest; to demand, act to relonging to me as a result of	recover, and receive f such claims; and to
all arm	TO SELL MY REAL ESTATE ON MY BEHAL eller under no compulsion to self and engaging in all my right, title and interest in my property at 131 and to convey by deed or general warranty with the convey for the real property described above in any and to sign, seaf, execute and deliver any and all de	an arms-length bargaining transition of the following transition of the following that the following statements of	ansaction, to any person of n VILLY NV 3146 C receive on my behalf paym nall deem wise; to transmit the	ny attomey's choice, address of property), ent of the purchase hese moneys to me,

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## **SPECIAL POWER OF ATTORNEY**

fl. er	<i>^</i>
201/1/0	1. TO PURCHASE REAL ESTATE IN MY NAME: To purchase in my name and for my use any real property in the City of 1375 MARY TO DRIVE County of DUGLAS, State of MEVADA, and for that
	purpose to make, indorse, accept, receive, sign, seal, execute, acknowledge, and deliver any application forms, documents, instruments, or paper necessary or convenient to enter into both a contract and mortgage or deed of trust upon said real estate for such price, at such rate of interest, and upon such terms as my agent shall deem best.
Destill	J. TO USE, OPERATE, AND REGISTER MY MOTOR VEHICLE(S): To use, operate, insure, title, license, and register, in my name, with any state or governmental agency any and all vehicles of which I am or may become the registered or legal owner.
gel Mil	TO SELL MY MOTOR VEHICLE: To sell my motor vehicle upon such terms, considerations and conditions as my agent spall think proper. Further, to execute and deliver to the proper persons and authority all documents, instruments, and papers necessary to affect the sale and transfer of registration and license of the said vehicle. To take possession of, operate, and maintain this automobile and to execute and deliver all necessary forms, papers, statements of ownership, and receipt to carry out the foregoing.
Ol Still	L. TO PURCHASE MOTOR VEHICLES IN MY NAME: To purchase motor vehicles in my name and upon such terms, considerations and conditions as my agent shall think proper. Further, to execute and deliver to the proper persons and authority all documents, instruments, and papers necessary to register and license such motor vehicles. To further execute any documents necessary to have repairs my agent deems necessary made on this automobile before I am able to take possession of the automobile. To take possession of, operate, and maintain this automobile and to execute and deliver all necessary forms, papers, statements of ownership, and receipt to carry out the foregoing.
Gil Isle	TO SHIP MY VEHICLE: To take possession of my vehicle, for the purpose of its removal and shipment from wherever it may be located, and to execute any release, voucher, receipt or any other instrument necessary or convenient for such purpose and to execute and deliver to the proper persons and authority, any and all documents, instruments and papers necessary to effect proper registration, insurance and license, in my name, of such automobile.
Gle Sill	TO TAKE POSSESSION OF MY VEHICLE AFTER SHIPMENT: To take possession of my vehicle, after shipment and delivery to any port, warehouse, depot, dock, or other place of storage or safekeeping, government or private; to execute and deliver any release, voucher, receipt, shipping ticket, certificate or other instrument necessary or convenient for such purpose and to execute and deliver to the proper persons and authority, any and all documents, instruments and papers necessary to register, insure and license, such vehicle in my name, and to transport the vehicle to me or any location which I direct in writing.
Jel Sill	TO TERMINATE MY RESIDENTIAL LEASE: To execute any and all documents and do all other things necessary or convenient to terminate any and all leases or rental agreements in my name.
Gel. Sill	TO LEASE MY HOUSE/APARTMENT TO OTHERS AND ACT AS MY LANDLORD/PROPERTY MANAGER: To pranage, control, lease, sublease, and otherwise act concerning my interest in my residential property; to collect and receive terms or income therefrom; pay taxes, charges and assessments on the same; repair, maintain, protect, preserve, after and improve the same; commit my resources and contract on my behalf regarding the same; and to do all things necessary or expedient to be done in my agent's judgment in connection with the property.
Geldel	TO ENROLL MY LAWFUL DEPENDENTS IN MILITARY BENEFITS PROGRAMS: To enroll my lawful dependents in DEERS, TRICARE, SMILECARE, or any other benefits program to which I am or my dependents are entitled by virtue of my military affiliation. To do all things necessary, and to execute and deliver to the proper persons and authority, any and all documents, instruments, and papers necessary and expedient to carry out the foregoing.
GIZALI	FOR MY SPOUSE TO RECEIVE NMCRS ASSISTANCE: If my spouse is my attorney-in-fact and I am deployed, I authorize my spouse, Michelle Gricial Advance of spouse) to receive necessary financial assistance from the Navy-Marine corps Relief Society (NMCRS) without my specific approval in the amount of 15, 500 (not to exceed \$2500). I also authorize my spouse and NMCRS to initiate an allotment in my name for repayment of the loan. I understand that assistance will be provided depending on the merits of the situation and the policies of NMCRS.
Det Still	8. MISCELLANEOUS: To do the following on my behalf:   The chase REAL ESTATE: 1375 MARY TO DRIVE GARDNERSILE, NW 89460
	LOT: 24) SUBD: GARDNERVILLE RANCHOS #7 SEC/TWM/RAG/MER. SEC 28 TWM 12 N RNG 20 E MAP REF: M2456

I hereby give and grant unto my attorney-in-fact full power and authority to do and perform each and every act and matter concerning the subject of this document as fully and effectually to all intents and purposes as I could do legally if I were present.



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## SPECIAL POWER OF ATTORNEY

I hereby authorize my attorney-in-fact to indemnify and hold harmless any third party who accepts and acts under or in accordance with this power of attorney.

I hereby ratify all that my attorney-in-fact shall lawfully do or cause to be done by this document.

I intend for this to be a DURABLE Power of Attorney. This Power of Attorney will continue to be effective if I become disabled, incapacitated, or incompetent. All acts done by my attorney-in-fact hereunder shall have the same effect and inure to the benefit of and bind myself and my heirs as if I were competent, and not disabled, incapacitated, or incompetent.

I shall be considered disabled or incapacitated for purposes of this Power of Attorney if a physician, based on that physician's examination, certifies in writing at a date subsequent to the date which this Power of Attorney is executed, that I am disabled from or incapable of exercising control over my person, property, personal affairs, or financial affairs. I authorize the physician who so certifies, to disclose my physical or mental condition to another person for purposes of this Power of Attorney. A third party who accepts this Power of Attorney, endorsed by proper physician certification of my disability or incapacity, is held harmless and fully protected from any action taken under this Power of Attorney.

This Power of Attorney shall become effective when I sign and execute it below. Unless sooner revoked or terminated by me, this Power of Attorney shall become NULL and VOID on \_\_\_\_\_\_\_\_(expiration date).

Notwithstanding my inclusion of a specific expiration date herein, if on the above-specified expiration date, or during the sixty (60) day period preceding that specified expiration date, I should be or have been determined by the United States Government to be in a military status of "missing," 'missing in action," or 'prisoner of war," or if I should be or have been properly certified, in writing, by a physician to be disabled from or incapable of exercising control over my person, property, personal affairs, or financial affairs, then this Power of Attorney shall remain valid and in full effect until sixty (60) days after I have returned to United States military control following termination of such status or sixty (60) days after I have recovered from such disability unless sooner revoked or terminated by me.

All business transacted hereunder for me or for my account shall be transacted in my name, and all endorsements and instruments executed by my attorney for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my attorney and the designation "attorney-in-fact."

IN WITNESS WHEREOF, I sign, seal, declare, publish, make and constitute this as and for my Power of Attorney at Camp Pendleton, California on MARCH 12, 2009 (today's date).

AUTHORIZED TO ACT AS A NOTARY

PUBLIC UNDER THE PROVISIONS OF

SECTION 1044 (a) OF TITLE 10 OF THE

Signature of Grantor

SECTION 1044 (a) OF TITLE 10 OF THE UNITED STATES CODE AND SECTION 1183.5 OF THE CALIFORNIA CIVIL

**ACKNOWLEGEMENT** 

CODE. NO SEAL REQUIRED BY LAW.

AUTHORIZED TO ACT AS A NOTARY PUBLIC UNDER THE PROVISIONS OF SECTION 1044a OF TITLE 10 OF THE UNITED STATES CODE AND SECTION 1183.5 OF THE CALIFORNIA CIVIL CODE. NO SEAL REQUIRED BY LAW.

Name of Officer and Position: M.G. A. R. S. S. Grade and Branch of Service: 531

Grade and Branch of Service: Some Command or Organization: Sound Cagnil Assistance

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Signature of Notary